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Application Number	10/814,749
Filing Date	March 30, 2004
First Named Inventor	Dominique Charmot
Art Unit	1618
Examiner Name	Michael G. Hartley
Attorney Docket Number	29329-715.201

Attached to this cover sheet are the following documents submitted in the above-identified patent application:

1. Transmittal Form (PTO/SB/21); and
2. Authorization to Act in a Representative Capacity.

Ref: 29329-715.201

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PAGE 1/3 \* RCVD AT 9/13/2005 4:24:32 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-6/34 \* DNIS:2738300 \* CSID:650 493 6811 \* DURATION (mm:ss):01:30

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FORM

(to be used for all correspondence after initial filing)

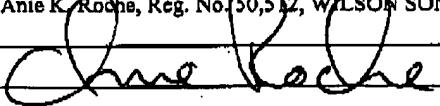
		Application Number	10/814,749
		Filing Date	March 30, 2004
		First Named Inventor	Dominique Charmot
		Art Unit	1618
		Examiner Name	Michael G. Hartley
Total Number of Pages in This Submission		Attorney Docket Number	29329-715.201

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply with Exhibits	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> <input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input checked="" type="checkbox"/> Authorization to Act in a Representative Capacity
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<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

## Remarks

## SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual name	Anie K. Roche, Reg. No. 50,512, WILSON SONSINI GOODRICH & ROSATI
Signature	
Date	September 13, 2005

## CERTIFICATE OF TRANSMISSION/MAILING

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Signature		Date	September 13, 2005

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Sample Form (03-04)

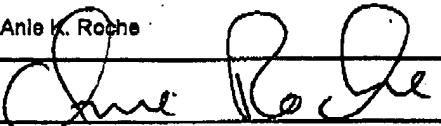
## AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of: Dominique Charmot, et al.	
Application No. 10/814,749	
Filed: March 30, 2004	
Title: ION BINDING COMPOSITIONS	
Attorney Docket No. 29329-715.201	Art Unit: 1618

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:

Name	Registration Number
Paul A. Stone	38,628

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SIGNATURE of Practitioner of Record			
Name Anie K. Roche			
Signature 	Date September 13, 2005		
Registration Number 50,512	Telephone (650) 483-9300		

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